

95TH GENERAL ASSEMBLY State of Illinois 2007 and 2008 HB4586

by Rep. Jack D. Franks

SYNOPSIS AS INTRODUCED:

See Index

Amends the Emergency Medical Services (EMS) Systems Act and the Fair Patient Billing Act. Makes the Fair Patient Billing Act applicable to vehicle service providers as defined in the Emergency Medical Services (EMS) Systems Act (that is, entities licensed by the Department of Public Health to provide emergency or non-emergency medical services utilizing at least ambulances or specialized emergency medical service vehicles). (Under current law, the Fair Patient Billing Act applies only to hospitals.) Provides that the obligations of vehicle service providers under these provisions take effect for services provided on or after the first day of the month that begins 180 days after the effective date of this amendatory Act. Makes a vehicle service provider subject to licensure sanctions under the Emergency Medical Services (EMS) Systems Act for failure to comply with the standards and requirements of the Fair Patient Billing Act.

LRB095 14220 DRJ 40088 b

FISCAL NOTE ACT
MAY APPLY

HOME RULE NOTE ACT MAY APPLY

1 AN ACT concerning regulation.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Emergency Medical Services (EMS) Systems Act is amended by changing Section 3.85 as follows:
- 6 (210 ILCS 50/3.85)

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- 7 Sec. 3.85. Vehicle Service Providers.
 - (a) "Vehicle Service Provider" means an entity licensed by the Department to provide emergency or non-emergency medical services in compliance with this Act, the rules promulgated by the Department pursuant to this Act, and an operational plan approved by its EMS System(s), utilizing at least ambulances or specialized emergency medical service vehicles (SEMSV).
 - (1) "Ambulance" means any publicly or privately owned on-road vehicle that is specifically designed, constructed or modified and equipped, and is intended to be used for, and is maintained or operated for the emergency transportation of persons who are sick, injured, wounded or otherwise incapacitated or helpless, or the non-emergency medical transportation of persons who require the presence of medical personnel to monitor the individual's condition or medical apparatus being used on such individuals.
 - (2) "Specialized Emergency Medical Services Vehicle"

or "SEMSV" means a vehicle or conveyance, other than those owned or operated by the federal government, that is primarily intended for use in transporting the sick or injured by means of air, water, or ground transportation, that is not an ambulance as defined in this Act. The term includes watercraft, aircraft and special purpose ground transport vehicles or conveyances not intended for use on public roads.

- (3) An ambulance or SEMSV may also be designated as a Limited Operation Vehicle or Special-Use Vehicle:
 - (A) "Limited Operation Vehicle" means a vehicle which is licensed by the Department to provide basic, intermediate or advanced life support emergency or non-emergency medical services that are exclusively limited to specific events or locales.
 - (B) "Special-Use Vehicle" means any publicly or privately owned vehicle that is specifically designed, constructed or modified and equipped, and is intended to be used for, and is maintained or operated solely for the emergency or non-emergency transportation of a specific medical class or category of persons who are sick, injured, wounded or otherwise incapacitated or helpless (e.g. high-risk obstetrical patients, neonatal patients).
- (b) The Department shall have the authority and responsibility to:

(1)	Requi	re all	Vehicle	Se	ervice	Provider	S,	both
publicly	and p	privately	owned,	to	functio	n within	an	EMS
System;								

- (2) Require a Vehicle Service Provider utilizing ambulances to have a primary affiliation with an EMS System within the EMS Region in which its Primary Service Area is located, which is the geographic areas in which the provider renders the majority of its emergency responses. This requirement shall not apply to Vehicle Service Providers which exclusively utilize Limited Operation Vehicles:
- (3) Establish licensing standards and requirements for Vehicle Service Providers, through rules adopted pursuant to this Act, including but not limited to:
 - (A) Vehicle design, specification, operation and maintenance standards;
 - (B) Equipment requirements;
 - (C) Staffing requirements; and
- 19 (D) Annual license renewal.
 - (4) License all Vehicle Service Providers that have met the Department's requirements for licensure, unless such Provider is owned or licensed by the federal government. All Provider licenses issued by the Department shall specify the level and type of each vehicle covered by the license (BLS, ILS, ALS, ambulance, SEMSV, limited operation vehicle, special use vehicle);

- (5) Annually inspect all licensed Vehicle Service Providers, and relicense such Providers that have met the Department's requirements for license renewal;
 - (6) Suspend, revoke, refuse to issue or refuse to renew the license of any Vehicle Service Provider, or that portion of a license pertaining to a specific vehicle operated by the Provider, after an opportunity for a hearing, when findings show that the Provider or one or more of its vehicles has failed to comply with the standards and requirements of (i) this Act or rules adopted by the Department pursuant to this Act or (ii) the Fair Patient Billing Act or rules adopted by the Attorney General pursuant to that Act;
 - (7) Issue an Emergency Suspension Order for any Provider or vehicle licensed under this Act, when the Director or his designee has determined that an immediate and serious danger to the public health, safety and welfare exists. Suspension or revocation proceedings which offer an opportunity for hearing shall be promptly initiated after the Emergency Suspension Order has been issued;
 - (8) Exempt any licensed vehicle from subsequent vehicle design standards or specifications required by the Department, as long as said vehicle is continuously in compliance with the vehicle design standards and specifications originally applicable to that vehicle, or until said vehicle's title of ownership is transferred;

- (9) Exempt any vehicle (except an SEMSV) which was being used as an ambulance on or before December 15, 1980, from vehicle design standards and specifications required by the Department, until said vehicle's title of ownership is transferred. Such vehicles shall not be exempt from all other licensing standards and requirements prescribed by the Department;
 - (10) Prohibit any Vehicle Service Provider from advertising, identifying its vehicles, or disseminating information in a false or misleading manner concerning the Provider's type and level of vehicles, location, primary service area, response times, level of personnel, licensure status or System participation; and
 - (11) Charge each Vehicle Service Provider a fee, to be submitted with each application for licensure and license renewal, which shall not exceed \$25.00 per vehicle, up to \$500.00 per Provider.
- 18 (Source: P.A. 89-177, eff. 7-19-95.)
- Section 10. The Fair Patient Billing Act is amended by changing Sections 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 70, and 75 as follows:
- 22 (210 ILCS 88/5)
- Sec. 5. Purpose; findings.
- 24 (a) The purpose of this Act is to advance the prompt and

accurate payment of health care services through fair and reasonable billing and collection practices of hospitals and vehicle service providers.

- (b) The General Assembly finds that:
- (1) Medical debts are the cause of an increasing number of bankruptcies in Illinois and are typically associated with severe financial hardship incurred by bankrupt persons and their families.
- (2) Patients, hospitals, <u>vehicle service providers</u>, and government bodies alike will benefit from clearly articulated standards regarding fair billing and collection practices for all Illinois hospitals <u>and vehicle service providers</u>.
- (3) Hospitals <u>and vehicle service providers</u> should employ responsible standards when collecting debt from their patients.
- (4) Patients should be provided sufficient billing information from hospitals <u>and vehicle service providers</u> to determine the accuracy of the bills for which they may be financially responsible.
- (5) Patients should be given a fair and reasonable opportunity to discuss and assess the accuracy of their bill.
- (6) Patients should be provided information regarding the hospital's <u>or vehicle service provider's</u> policies regarding financial assistance options the hospital <u>or</u>

- 1 <u>vehicle service provider</u> may offer to qualified patients.
- 2 (7) Hospitals <u>and vehicle service providers</u> should 3 offer patients the opportunity to enter into a reasonable 4 payment plan for their hospital care <u>and vehicle service</u> 5 provider services.
- 6 (8) Patients have an obligation to pay for the hospital
 7 and vehicle service provider services they receive.
- 8 (Source: P.A. 94-885, eff. 1-1-07.)
- 9 (210 ILCS 88/10)

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insurers.

- 10 Sec. 10. Definitions. As used in this Act:
- "Collection action" means any referral of a bill to a collection agency or law firm to collect payment for services from a patient or a patient's guarantor for hospital <u>or vehicle</u>
- 15 "Health care plan" means a health insurance company, health

service provider services.

16 maintenance organization, preferred provider arrangement, or third party administrator authorized in this State to issue 17 18 policies or subscriber contracts or administer those policies 19 and contracts that reimburse for inpatient and outpatient services provided in a hospital, or services provided by a 20 21 vehicle service provider, or both. Health care plan, however, 22 does not include any government-funded program such as Medicare or Medicaid, workers' compensation, and accident liability 23

"Insured patient" means a patient who is insured by a

- 1 health care plan.
- 2 "Patient" means the individual receiving services from the
- 3 hospital or vehicle service provider and any individual who is
- 4 the guarantor of the payment for such services.
- 5 "Reasonable payment plan" means a plan to pay a hospital
- 6 bill or vehicle service provider bill that is offered to the
- 7 patient or the patient's legal representative and takes into
- 8 account the patient's available income and assets, the amount
- 9 owed, and any prior payments.
- "Uninsured patient" means a patient who is not insured by a
- 11 health care plan and is not a beneficiary under a
- 12 government-funded program, workers' compensation, or accident
- 13 liability insurance.
- "Vehicle service provider" has the meaning attributed to
- that term in the Emergency Medical Services (EMS) Systems Act.
- 16 (Source: P.A. 94-885, eff. 1-1-07.)
- 17 (210 ILCS 88/15)
- 18 Sec. 15. Patient notification.
- 19 (a) Each hospital shall post a sign with the following
- 20 notice:
- 21 "You may be eligible for financial assistance under
- 22 the terms and conditions the hospital offers to qualified
- 23 patients. For more information contact [hospital financial
- 24 assistance representative] ".
- 25 (a-5) Each vehicle service provider shall post a sign with

the following notice:

"You may be eligible for financial assistance under the terms and conditions the vehicle service provider offers to qualified patients. For more information contact [vehicle service provider financial assistance representative]".

- (b) The sign under subsection (a) or (a-5) shall be posted conspicuously in the admission and registration areas of the hospital, or in a comparable area of the vehicle service provider's place of business as determined by the Attorney General by rule.
- (c) The sign shall be in English, and in any other language that is the primary language of at least 5% of the patients served by the hospital or vehicle service provider annually.
- (d) Each hospital <u>or vehicle service provider</u> that has a website must post a notice in a prominent place on its website that financial assistance is available at the hospital <u>or vehicle service provider</u>, a description of the financial assistance application process, and a copy of the financial assistance application.
- (e) Each hospital or vehicle service provider must make available information regarding financial assistance from the hospital or vehicle service provider in the form of either a brochure, an application for financial assistance, or other written material in the hospital admission or registration area, or in a comparable area of the vehicle service provider's place of business as determined by the Attorney General by

- 1 <u>rule</u>.
- 2 (Source: P.A. 94-885, eff. 1-1-07.)
- 3 (210 ILCS 88/20)
- 4 Sec. 20. Bill information. If a hospital or vehicle service
- 5 provider bills a patient for health care services, including
- 6 <u>services provided by a vehicle service provider</u>, the hospital
- 7 or vehicle service provider shall provide with its bill the
- 8 following information:
- 9 (1) the date or dates that health care services were
- 10 provided to the patient;
- 11 (2) a brief description of the hospital <u>or vehicle</u>
- 12 <u>service provider</u> services;
- 13 (3) the amount owed for hospital <u>or vehicle service</u>
- 14 provider services;
- 15 (4) hospital <u>or vehicle service provider</u> contact
- information for addressing billing inquiries;
- 17 (5) a statement regarding how an uninsured patient may
- 18 apply for consideration under the hospital's or vehicle
- 19 service provider's financial assistance policy on or with
- 20 each hospital or vehicle service provider bill sent to an
- 21 uninsured patient; and
- 22 (6) notice that the patient may obtain an itemized bill
- 23 upon request.
- If a hospital or vehicle service provider bills a patient,
- 25 then the hospital or vehicle service provider must provide an

- 1 itemized statement of charges for the inpatient and outpatient
- 2 services rendered by the hospital, or for the services rendered
- 3 by the vehicle service provider, upon receiving a request from
- 4 the patient.
- 5 (Source: P.A. 94-885, eff. 1-1-07.)
- 6 (210 ILCS 88/25)
- 7 Sec. 25. Bill inquiries.
- 8 (a) A hospital <u>or vehicle service provider</u> must implement a
- 9 process for patients to inquire about or dispute a bill. Such
- 10 process must include a telephone number for billing inquiries
- and disputes and may include any of the following options:
- 12 (1) a toll-free telephone number that the patient may
- 13 call;
- 14 (2) an address to which he or she may write;
- 15 (3) a department or identified individual within the
- hospital or vehicle service provider he or she may call or
- 17 write, with appropriate contact information; or
- 18 (4) a website or e-mail address.
- 19 (b) All hospital or vehicle service provider bills and
- 20 collection notices must provide a telephone number allowing the
- 21 patient to inquire about or dispute a bill.
- (c) The hospital or vehicle service provider must return
- 23 calls made by patients as promptly as possible, but no later
- than 2 business days after the call is made. If the hospital's
- or vehicle service provider's billing inquiry process involves

- 1 correspondence from the patient, the hospital <u>or vehicle</u>
- 2 service provider must respond within 10 business days of
- 3 receipt of the patient correspondence. For purposes of this
- 4 Section, "business day" means a day on which the hospital's or
- 5 vehicle service provider's billing office is open for regular
- 6 business.
- 7 (Source: P.A. 94-885, eff. 1-1-07.)
- 8 (210 ILCS 88/30)
- 9 Sec. 30. Pursuing collection action.
- 10 (a) Hospitals <u>or vehicle service providers</u>, and their 11 agents, may pursue collection action against an uninsured
- 12 patient only if the following conditions are met:
- 13 (1) The hospital <u>or vehicle service provider</u> has given
- the uninsured patient the opportunity to:
- 15 (A) assess the accuracy of the bill;
- 16 (B) apply for financial assistance under the 17 hospital's <u>or vehicle service provider's</u> financial
- 18 assistance policy; and
- 19 (C) avail themselves of a reasonable payment plan.
- 20 (2) If the uninsured patient has indicated an inability
 21 to pay the full amount of the debt in one payment, the
 22 hospital or vehicle service provider has offered the
 23 patient a reasonable payment plan. The hospital or vehicle
 24 service provider may require the uninsured patient to
 25 provide reasonable verification of his or her inability to

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pay the full amount of the debt in one payment.

- (3) To the extent the hospital or vehicle service provider provides financial assistance and the circumstances of the uninsured patient suggest the potential for eligibility for charity care, the uninsured patient has been given at least 60 days following the date of discharge or receipt of outpatient care, or the date of receipt of services provided by the vehicle service provider, submit application for to an financial assistance.
- (4) If the uninsured patient has agreed to a reasonable payment plan with the hospital <u>or vehicle service provider</u>, and the patient has failed to make payments in accordance with that reasonable payment plan.
- (5) If the uninsured patient informs the hospital or vehicle service provider that he or she has applied for health care coverage under Medicaid, Kidcare, or other government-sponsored health care program (and there is a reasonable basis to believe that the patient will qualify for such program) but the patient's application is denied.
- (b) A hospital <u>or vehicle service provider</u> may not refer a bill, or portion thereof, to a collection agency or attorney for collection action against the insured patient, without first offering the patient the opportunity to request a reasonable payment plan for the amount personally owed by the patient. Such an opportunity shall be made available for the 30

- days following the date of the initial bill. If the insured patient requests a reasonable payment plan, but fails to agree to a plan within 30 days of the request, the hospital or vehicle service provider may proceed with collection action against the patient.
 - (c) No collection agency, law firm, or individual may initiate legal action for non-payment of a hospital <u>or vehicle</u> <u>service provider</u> bill against a patient without the written approval of an authorized hospital employee <u>or vehicle service</u> <u>provider employee</u> who reasonably believes that the conditions for pursuing collection action under this Section have been met.
 - (d) Nothing in this Section prohibits a hospital <u>or vehicle</u> <u>service provider</u> from engaging an outside third party agency, firm, or individual to manage the process of implementing the hospital's <u>or vehicle service provider's</u> financial assistance and reasonable payment plan programs and policies so long as such agency, firm, or individual is contractually bound to comply with the terms of this Act.
- 20 (Source: P.A. 94-885, eff. 1-1-07.)
- 21 (210 ILCS 88/35)
- Sec. 35. Collection limitations. The hospital <u>or vehicle</u>
 service provider shall not pursue legal action for non-payment
 of a hospital <u>or vehicle service provider</u> bill against
 uninsured patients who have clearly demonstrated that they have

- 1 neither sufficient income nor assets to meet their financial
- 2 obligations provided the patient has complied with Section 45
- 3 of this Act.
- 4 (Source: P.A. 94-885, eff. 1-1-07.)
- 5 (210 ILCS 88/40)
- 6 Sec. 40. Hospital or vehicle service provider agents. The
- 7 hospital or vehicle service provider must ensure that any
- 8 external collection agency, law firm, or individual engaged by
- 9 the hospital or vehicle service provider to obtain payment of
- 10 outstanding bills for hospital or vehicle service provider
- 11 services agrees in writing to comply with the collections
- 12 provisions of this Act.
- 13 (Source: P.A. 94-885, eff. 1-1-07.)
- 14 (210 ILCS 88/45)
- 15 Sec. 45. Patient responsibilities.
- 16 (a) To receive the protection and benefits of this Act, a
- 17 patient responsible for paying a hospital or vehicle service
- 18 provider bill must act reasonably and cooperate in good faith
- 19 with the hospital or vehicle service provider by providing the
- 20 hospital or vehicle service provider with all of the reasonably
- 21 requested financial and other relevant information and
- 22 documentation needed to determine the patient's eligibility
- 23 under the hospital's or vehicle service provider's financial
- 24 assistance policy and reasonable payment plan options to

- qualified patients within 30 days of a request for such information.
- (b) To receive the protection and benefits of this Act, a 3 patient responsible for paying a hospital or vehicle service 4 5 provider bill shall communicate to the hospital or vehicle service provider any material change in the patient's financial 6 7 situation that may affect the patient's ability to abide by the 8 provisions of an agreed upon reasonable payment plan or 9 qualification for financial assistance within 30 days of the 10 change.
- 11 (Source: P.A. 94-885, eff. 1-1-07.)
- 12 (210 ILCS 88/50)

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- 13 Sec. 50. Notification concerning out-of-network providers.
- 14 <u>(a)</u> During the admission or as soon as practicable
 15 thereafter, the hospital must provide an insured patient with
 16 written notice that:
- 17 (1) the patient may receive separate bills for services 18 provided by health care professionals affiliated with the 19 hospital;
 - (2) if applicable, some hospital staff members may not be participating providers in the same insurance plans and networks as the hospital;
 - (3) if applicable, the patient may have a greater financial responsibility for services provided by health care professionals at the hospital who are not under

1 contract with the patient's health care plan; and

- 2 (4) questions about coverage or benefit levels should 3 be directed to the patient's health care plan and the 4 patient's certificate of coverage.
- (b) As soon as practicable after providing services to an insured patient, the vehicle service provider must provide the patient with a written notice stating that questions about coverage or benefit levels should be directed to the patient's health care plan and the patient's certificate of coverage.
- 10 (Source: P.A. 94-885, eff. 1-1-07.)
- 11 (210 ILCS 88/55)

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- 12 Sec. 55. Enforcement.
- 13 (a) The Attorney General is responsible for administering 14 and ensuring compliance with this Act, including the 15 development of any rules necessary for the implementation and 16 enforcement of this Act.
- 17 (b) The Attorney General shall develop and implement a 18 process for receiving and handling complaints from 19 individuals, or vehicle service providers 20 regarding possible violations of this Act.
 - (c) The Attorney General may conduct any investigation deemed necessary regarding possible violations of this Act by any hospital or vehicle service provider, including, without limitation, the issuance of subpoenas to: (i) require the hospital or vehicle service provider to file a statement or

- report or answer interrogatories in writing as to all information relevant to the alleged violations; (ii) examine under oath any person who possesses knowledge or information directly related to the alleged violations; and (iii) examine any record, book, document, account, or paper necessary to investigate the alleged violation.
 - (d) If the Attorney General determines that there is a reason to believe that any hospital or vehicle service provider has violated the Act, the Attorney General may bring an action in the name of the People of the State against the hospital or vehicle service provider to obtain temporary, preliminary, or permanent injunctive relief for any act, policy, or practice by the hospital or vehicle service provider that violates this Act. Before bringing such an action, the Attorney General may permit the hospital or vehicle service provider to submit a Correction Plan for the Attorney General's approval.
 - (e) This Section applies if:
 - (i) a court orders a party to make payments to the Attorney General and the payments are to be used for the operations of the Office of the Attorney General; or
 - (ii) a party agrees, in a Correction Plan under this Act, to make payments to the Attorney General for the operations of the Office of the Attorney General.
 - (f) Moneys paid under any of the conditions described in subsection (e) shall be deposited into the Attorney General Court Ordered and Voluntary Compliance Payment

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- Projects Fund. Moneys in the Fund shall be used, subject to 1 appropriation, for the performance of any function pertaining to the exercise of the duties to the Attorney General including, but not limited to, enforcement of any law of this State and conducting public education programs; however, any moneys in the Fund that are required by the court to be used 7 for a particular purpose shall be used for that purpose.
 - (q) The Attorney General may seek the assessment of one or more of the following civil monetary penalties in any action filed under this Act where the hospital or vehicle service provider knowingly violates the Act:
 - (1) For violations, involving a pattern or practice, of not providing the information to patients under Sections 15, 20, 25, and 50, the civil monetary penalty shall not exceed \$500 per violation.
 - (2) For violations involving the failure to engage in or refrain from certain activities under Sections 30, 35 and 40, the civil monetary penalty shall not exceed \$1000 per violation.
 - (h) In the event a court grants a final order of relief against any hospital or vehicle service provider for a violation of this Act, the Attorney General may, after all appeal rights have been exhausted, refer the hospital or vehicle service provider to the Illinois Department of Public Health for possible adverse licensure action under the Hospital Licensing Act or the Emergency Medical Services (EMS) Systems

- 1 Act.
- 2 (Source: P.A. 94-885, eff. 1-1-07.)
- 3 (210 ILCS 88/60)

4 Sec. 60. Limitations. Nothing in this Act shall be used by 5 any private or public payer as a basis for reducing the third-party payer's rates, policies, or usual and customary 6 7 charges for any health care service. Nothing in this Act shall 8 be construed as imposing an obligation on a hospital or vehicle 9 service provider to provide any particular service or treatment 10 to an uninsured patient. Nothing in this Act shall be construed 11 as imposing an obligation on a hospital or vehicle service 12 provider to file a lawsuit to collect payment on a patient's 1.3 bill. This Act establishes new and additional legal obligations 14 for all hospitals and vehicle service providers in the State of 15 Illinois. Nothing in this Act shall be construed as relieving 16 or reducing any hospital or vehicle service provider of any other obligation under the Illinois Constitution or under any 17 18 other statute or the common law including, without limitation, obligations of hospitals or vehicle service providers to 19 20 furnish financial assistance or community benefits. No 21 provision of this Act shall derogate from the common law or 22 statutory authority of the Attorney General, nor shall any provision be construed as a limitation on the common law or 23 24 statutory authority of the Attorney General to investigate hospitals or vehicle service providers or initiate enforcement 25

- 1 actions against them including, without limitation, the
- 2 authority to investigate at any time charitable trusts for the
- 3 purpose of determining and ascertaining whether they are being
- 4 administered in accordance with Illinois law and with the terms
- 5 purposes thereof.
- 6 (Source: P.A. 94-885, eff. 1-1-07.)
- 7 (210 ILCS 88/70)
- 8 Sec. 70. Application.
- 9 (a) This Act applies to all hospitals licensed under the
- 10 Hospital Licensing Act or the University of Illinois Hospital
- 11 Act and to all vehicle service providers licensed under the
- 12 Emergency Medical Services (EMS) Systems Act. This Act does not
- apply to a hospital or vehicle service provider that does not
- 14 charge for its services.
- 15 (b) The obligations of hospitals under this Act shall take
- 16 effect for services provided on or after the first day of the
- month that begins 180 days after the effective date of this
- 18 Act. The obligations of vehicle service providers under this
- 19 Act shall take effect for services provided on or after the
- 20 first day of the month that begins 180 days after the effective
- 21 date of this amendatory Act of the 95th General Assembly.
- 22 (Source: P.A. 94-885, eff. 1-1-07.)
- 23 (210 ILCS 88/75)
- Sec. 75. Home rule. A home rule unit may not regulate

- 1 hospitals <u>or vehicle service providers</u> in a manner inconsistent
- with the provisions of this Act. This Section is a limitation
- 3 under subsection (i) of Section 6 of the Article VII of the
- 4 Illinois Constitution on the concurrent exercise by home rule
- 5 units of powers and functions exercised by the State.
- 6 (Source: P.A. 94-885, eff. 1-1-07.)

HB4586

1 INDEX

2 Statutes amended in order of appearance

- 3 210 ILCS 50/3.85
- 4 210 ILCS 88/5
- 5 210 ILCS 88/10
- 6 210 ILCS 88/15
- 7 210 ILCS 88/20
- 8 210 ILCS 88/25
- 9 210 ILCS 88/30
- 10 210 ILCS 88/35
- 11 210 ILCS 88/40
- 12 210 ILCS 88/45
- 13 210 ILCS 88/50
- 14 210 ILCS 88/55
- 15 210 ILCS 88/60
- 16 210 ILCS 88/70
- 17 210 ILCS 88/75